

Summary of Injury Prevention Survey

December 2008

In an effort to move Indiana forward in the area of injury prevention, a short online survey (9 questions) was sent out to try and determine what programs and initiatives exist in the state. The survey link was sent to colleagues on the Indiana Trauma Taskforce listserv, members of the Indiana Trauma Network, the Injury Prevention Advisory Council and a listserv of all emergency departments in the state. The survey directions also indicated to forward the survey to others in the injury prevention field who could provide information and might not have received the survey from the Indiana State Department of Health (ISDH).

The survey was distributed via survey monkey and the ISDH received 55 unduplicated responses. Of the 55 respondents, 70.9% (39/55) indicated that their organization had an injury prevention (IP) program. The majority (71.8%, 28/39) of the injury prevention programs are hospital based. Of the respondents who indicated that they did not have an actual IP program, three indicated that some type of injury prevention was being done at their facility, ie, car seat checks, attendance at health fairs, fire department programs.

After indicating whether or not an injury prevention program existed at the organization, the next question asked about focus area topics for each program. Out of the 55 respondents, 42 groups (39 with specific IP programs and 3 without specific IP programs) checked or wrote in the focus areas that applied to their organizations. The top focus areas were motor vehicle crashes followed by bike/pedestrian safety and falls. Almost three-quarters of the respondents indicated that motor vehicle crashes were a focus area in their organization (30/42, 71.4%) and almost the same number of people indicated that bike/pedestrian safety was a focus area (28/42, 66.7%) (See Table 1).

The next question on the survey asked about the emphasis or goals of each injury prevention program. Again, 42 groups (38 with IP programs and 3 without IP programs) responded to the question. Education was a goal of almost 100% of the respondents (41/42, 97.6%) followed by awareness (39/42, 92.9%) (See Table 2).

A list of different populations was provided in the next question that asked about the types of populations that the IP groups work with. There were 42 respondents to the question (39 with IP programs and 3 without programs). The largest population that the respondents work with around Indiana is children (37/42, 88.1%) followed by adolescents (36/42, 85.7%). Only 54.8% of respondents indicated that they work with the elderly population (23/42). Males and females are represented about equal, but less than half of the respondents indicated that they work with the gay/lesbian/transgender population in their injury prevention efforts (16/42, 38.1%). Different racial groups are represented about equally (See Table 3).

The next question asked: “What geographic location does your program cover?” Respondents answered the question differently and some indicated the counties that they serve, others indicated a region of Indiana, while others indicated specific cities. However, the answers can provide an indication of where injury prevention programs are being conducted. Of the 42 respondents (39 with IP programs and 3 without programs, but whom conduct IP activities), 2 respondents indicated that their IP programs are specific to their hospital employees, 9 respondents indicated large geographic regions such as Northeast Indiana, Northwest Indiana, Central Indiana (6 respondents), and Southwest Indiana. Six respondents indicated that their programs covered the entire state and that they can provide education and programming to any groups or organizations. Other respondents indicated the specific county that is covered in their IP program and 19.6% (18/92) of Indiana counties were represented in this survey. One respondent said that they cover 50 counties while another said they cover the tri-state area of Indiana, Illinois and Kentucky. One respondent indicated that their program is national and international while another respondent indicated that their group has chapters throughout Indiana.

The survey does have limitations. One limitation is that not all Injury Prevention groups throughout the state submitted data. More follow-up is needed in order to obtain the most complete data. However, the current data provides information on the types of programs that exist and does provide a good baseline of the types of injury prevention being done throughout Indiana. Another limitation is that even if a respondent has an injury prevention program, there is no way to identify if the injury prevention program is being evaluated and if the program is working. A follow-up survey should be sent to expand on the questions already asked. Different age and gender structures, ethnicity and attitudes, resources, social structure and environments lead to different types and severity of injuries and different injury rates. To ensure access to adequate resources required for studying these differences, outcomes and evaluation must be conducted.

Table 1. Injury Prevention Focus Topics

Injury Prevention Focus Topics	Number of Responses	Percent of Total (N=42)
Motor Vehicle	30	71.4
Bike/Pedestrian Safety	28	66.7
Falls	21	50.0
Fire/Burns	16	38.1
Poisoning	14	33.3
Water & Boat Safety	14	33.3
Spinal Cord Injury	12	28.6
Traumatic Brain Injury	11	26.2
Child Abuse	10	23.8
Domestic Violence	10	23.8
Rape/Sexual Assault	10	21.4
ATV/Recreational Vehicle Crashes	9	19.0
Suicide	8	16.7
Fireworks	7	9.5
Agriculture Safety	4	9.5
Car Seat Safety/Child Passenger Safety	4	7.1
Homicide	4	9.5
Alcohol Intoxication and Driving	3	4.8
Environmental/Weather	2	4.8
Home Safety	2	4.8
Playground	2	4.8
Railroad Safety	2	4.8

Safe Patient Handling/Arjo Lift Equipment	2	2.4
All ENCARE Programs	1	2.4
Bullying	1	2.4
Elderly Safety	1	2.4
Gun Safety	1	2.4
Safe Sitter	1	2.4
School Bus Drivers	1	2.4
Senior Drivers	1	2.4
Tool Safety	1	2.4
Toy Recall Awareness	1	2.4
Wilderness Safety	1	2.4

*More than one answer could be selected; therefore, Percent of Total Responses does not add up to 100%.

Table 2.Emphasis or Goals of Injury Prevention Programs

Emphasis/Goals	Number of Responses	Percent of Total Responses (N=42)
Education	41	97.6
Awareness	39	92.9
Training	24	57.1
Giving out Products	19	45.2
Organizing Events	16	38.1
Evaluation	15	35.7
Data Collection	13	31.0
Policy	11	26.2
Research	10	23.8

*More than one answer could be selected; therefore, Percent of Total Responses does not add up to 100%.

Table 3: Populations that Injury Prevention Groups Focus Efforts

Population	Number of Responses	Percent of Total Responses (N=42)
Infants	28	66.7
Children	37	88.1
Adolescents	36	85.7
Young Adults	29	69.0
Adults	31	73.8
Elderly	23	54.8
Males	26	61.9
Females	27	64.3
Gay/Lesbian/Transgender	16	38.1
White	27	64.3
Black	26	61.9
Hispanic	27	64.3
Multi-Racial	26	61.9
Amish	1	2.4
Burmese	1	2.4
Fire Fighters	1	2.4

*More than one answer could be selected; therefore, Percent of Total Responses does not add up to 100%.